

**EXHIBIT 2: CLAIM NO. 1861**

B10 (Official Form 10) (04/13) (Modified)

UNITED STATES BANKRUPTCY COURT      EASTERN DISTRICT of MICHIGAN		CHAPTER 9 PROOF OF CLAIM <div style="font-size: 2em; font-weight: bold; margin: 10px 0;">FILED</div> <div style="font-size: 1.2em; font-weight: bold; margin: 10px 0;">FEB 20 2014</div> <div style="font-size: 0.8em; font-weight: bold; margin: 10px 0;">COURT USE ONLY</div> <div style="font-size: 0.8em;"> <input type="checkbox"/> Check this box if this claim amends a previously filed claim.            US Bankruptcy Court            MI Eastern District            Court Claim Number: _____            (If known)            Filed on: _____         </div>
Name of Debtor: <b>City of Detroit, Michigan</b>		Case Number: <b>13-53846</b>
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing.		
Name of Creditor (the person or other entity to whom the debtor owes money or property): <b>Detroit Police Lieutenants and Sergeants Association ("DPLSA")</b>		
Name and address where notices should be sent: <b>Julie Beth Teicher Erman, Teicher, Zucker &amp; Freedman, P.C. 400 Galleria Officentre, Suite 444 Southfield, MI 48034 Telephone number: 248/827-4100 email: jteicher@ermaneteicher.com</b>		<div style="text-align: center;"> <div style="font-size: 1.5em; font-weight: bold; margin: 0;">RECEIVED</div> <div style="font-size: 1.2em; font-weight: bold; margin: 5px 0;">FEB 24 2014</div> <div style="font-size: 0.8em; font-weight: bold; margin: 0;">KURTZMAN CARSON CONSULTANTS</div> </div>
Name and address where payment should be sent (if different from above): <b>Peter P. Sudnick, Peter P. Sudnick, PC 2555 Crooks Rd., Ste. 150, Troy, MI 48084 Telephone number: 248/643-8533 email: psudnick@sudnicklaw.com</b>		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.
1. Amount of Claim as of Date Case Filed:      \$ <u>Amount of claim is presently unliquidated.</u> If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.		
2. Basis for Claim: <u>See Exhibit 1.</u> (See instruction #2)		
3. Last four digits of any number by which creditor identifies debtor:	3a. Debtor may have scheduled account as: _____ (See instruction #3a)	
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of setoff; attach required redacted documents, and provide the requested information.		
Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: _____ Value of Property: \$ _____ Annual Interest Rate (when case was filed) _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable		Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____
5. Amount of Claim Entitled to Priority as an Administrative Expense under 11 U.S.C. §§ 503(b)(9) and 507(a)(2).      \$ _____		
5b. Amount of Claim Otherwise Entitled to Priority. Specify Applicable Section of 11 U.S.C. § _____      \$ _____		
6. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)		
7. Documents: Attached are redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a statement providing the information required by FRBP 3001(c)(3)(A). If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. (See instruction #7, and the definition of "redacted".) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. The underlying documents relative to this claim are in the City's possession. If the documents are not available, please explain: _____		
8. Signature: (See instruction # 8) Check the appropriate box. <input type="checkbox"/> I am the creditor. <input checked="" type="checkbox"/> I am the creditor's authorized agent. <input type="checkbox"/> I am the trustee, or the debtor, or their authorized agent. <input type="checkbox"/> I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3004.)      (See Bankruptcy Rule 3005.)		
I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief. Print Name: <u>Julie Beth Teicher</u> Title: <u>Attorney and Authorized Agent</u> Company: <u>Erman, Teicher, et al</u> Address and telephone number (if different from notice address above): _____ <div style="text-align: center; margin-top: 20px;"> <div style="display: inline-block; text-align: center;">               (Signature)           </div> <div style="display: inline-block; text-align: center; margin-left: 20px;"> <u>2-20-14</u>              (Date)           </div> </div>		
Telephone number: _____ email: _____ <div style="text-align: center;"> <div style="font-size: 1.2em; font-weight: bold; margin: 0;">13-53846-jtl Doc 9614-2 Filed 04/03/15 Entered 04/03/15 13:44:51 Page 2 of 4</div> <div style="font-size: 0.8em; margin: 5px 0;">Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment</div> <div style="font-size: 0.8em; font-weight: bold; margin: 0;">1353846140220000000000373</div> </div>		

### **DPLSA PROOF OF CLAIM ATTACHMENT**

Pursuant to the Order, Pursuant to Sections 105, 501 and 503 of the Bankruptcy Code and Bankruptcy Rules 2002 and 3003(c), Establishing Bar Dates for Filing Proofs of Claim and Approving Form and Manner of Notice Thereof [Doc. No. 1782] (the "Bar Date Order"), the DPLSA is authorized to file this Proof of Claim on behalf of its members. The DPLSA and its members are referred to hereinafter as "Claimants" or any individual as a "Claimant".

This Proof of Claim and Attachment are filed to preserve the rights of Claimants. The filing of this Proof of claim is not intended to be, and should not be construed as:

- 1) An election of remedies;
- 2) A waiver of any past, present or future defaults by the City or any third party;
- 3) A waiver of Claimants' claims against any other parties liable to Claimants;
- 4) A waiver or limitation of any rights, claims or defenses of Claimants, including, but not limited to, the right to challenge the Court's jurisdiction to hear disputes arising out of the claims set forth in this Proof of Claim or to make any motion to have such dispute resolved in a forum other than the Court;
- 5) A waiver of Claimants' rights to amend this Proof of Claim for any purpose;
- 6) A limitation on the number or type of claims filed by Claimants.

The filing of this Proof of Claim is not intended to and should not be construed to be a consent to or submission to the jurisdiction of the Court for any reason. Claimant has challenged the City's eligibility for relief under chapter 9 of the Bankruptcy Code. Claimant has appealed the Court's Opinion Regarding Eligibility dated December 5, 2013 [Doc. No. 1945] (the "Eligibility Opinion") and the Order for Relief dated December 5, 2013 [Doc. No. 1946] and moved for certification for direct appeal to the United States Court of Appeals for the Sixth Circuit pursuant to 29 U.S.C. §158(d)(2) and Fed. R. Bankr. Pro. 8001(f). The filing of this Proof of Claim is not a waiver of Claimants' continuing challenge to the eligibility of the City.

Pursuant to the Bar Date Order, individual members of the DPLSA have the right to file a Proof of Claim on their own behalf.

**EXHIBIT 1 TO DPLSA PROOF OF CLAIM**

**BREACH OF CONTRACT**

This basis for this claim: Any and all claims arising from or related to the City's breach of or non-performance of any terms and conditions of the Collective Bargaining Agreement between the City and the DPLSA, and/or the City's breach of or non-performance of any contractual terms imposed on the DPLSA pursuant to the City Employment Terms ("CETs"), or any orders or actions of the Emergency Manager.

The underlying documents in support of this claim are in the City's possession.